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CLERK U.S. DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

Ken Clerk(Warden)

Edmand G,Brown Jr.  
(Attorney General)

Plaintiff,

vs.

Defendant.

Dewane Kent Durr

CASE NO. \_\_\_\_\_

PRISONER'S  
APPLICATION TO PROCEED  
IN FORMA PAUPERIS

WHA

(PR)

I, Dewane Kent Durr, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes \_\_\_\_ No X

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: \_\_\_\_\_ Net: \_\_\_\_\_

Employer: \_\_\_\_\_

1 If the answer is "no," state the date of last employment and the amount of the gross and net  
 2 salary and wages per month which you received. (If you are imprisoned, specify the last  
 3 place of employment prior to imprisonment.)

4 Unemployed was receiving general relief

5 \_\_\_\_\_  
 6 \_\_\_\_\_

7 2. Have you received, within the past twelve (12) months, any money from any of the  
 8 following sources:

9 a. Business, Profession or Yes \_\_\_\_ No X  
 10 self employment

11 b. Income from stocks, bonds, Yes \_\_\_\_ No X  
 12 or royalties?

13 c. Rent payments? Yes \_\_\_\_ No X

14 d. Pensions, annuities, or Yes \_\_\_\_ No X  
 15 life insurance payments?

16 e. Federal or State welfare payments, Yes \_\_\_\_ No X  
 17 Social Security or other govern-  
 18 ment source?

19 If the answer is "yes" to any of the above, describe each source of money and state the amount  
 20 received from each.

21 \_\_\_\_\_  
 22 \_\_\_\_\_

23 3. Are you married? Yes X No \_\_\_\_

24 Spouse's Full Name: Desiree terrell Toney

25 Spouse's Place of Employment: Unknown

26 Spouse's Monthly Salary, Wages or Income:

27 Gross \$ Unknown Net \$ Unknown

28 4. a. List amount you contribute to your spouse's support: \$ None

1           b.     List the persons other than your spouse who are dependent upon you for  
 2                 support and indicate how much you contribute toward their support. (NOTE:  
 3                 For minor children, list only their initials and ages. DO NOT INCLUDE  
 4                 THEIR NAMES.).

5     None

6

7     5.     Do you own or are you buying a home?                   Yes ☐ No ☒

8     Estimated Market Value: \$ \_\_\_\_\_ Amount of Mortgage: \$ \_\_\_\_\_

9     6.     Do you own an automobile?                               Yes ☐ No ☒

10    Make \_\_\_\_\_ Year \_\_\_\_\_ Model \_\_\_\_\_

11    Is it financed? Yes ☐ No ☒ If so, Total due: \$ \_\_\_\_\_

12    Monthly Payment: \$ \_\_\_\_\_

13    7.     Do you have a bank account? Yes ☐ No ☒ (Do not include account numbers.)

14    Name(s) and address(es) of bank: \_\_\_\_\_

15    \_\_\_\_\_

16    Present balance(s): \$ \_\_\_\_\_

17    Do you own any cash? Yes ☐ No ☒ Amount: \$ \_\_\_\_\_

18    Do you have any other assets? (If "yes," provide a description of each asset and its estimated  
 19    market value.) Yes ☐ No ☒

20    \_\_\_\_\_

21    8.     What are your monthly expenses?

22    Rent: \$ No Utilities: No

23    Food: \$ No Clothing: No

24    Charge Accounts:

25    Name of Account                   Monthly Payment                   Total Owed on This Acct.

26    N/A                               \$ N/A                               \$ N/A

27    N/A                               \$ N/A                               \$ N/A

28    N/A                               \$ N/A                               \$ N/A 9. Do

1 you have any other debts? (List current obligations, indicating amounts and to whom they are  
2 payable. Do not include account numbers.)

3 No

4  
5 10. Does the complaint which you are seeking to file raise claims that have been presented  
6 in other lawsuits? Yes \_\_\_ No X

7 Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in  
8 which they were filed.

9 N/A

10  
11 I consent to prison officials withdrawing from my trust account and paying to the court  
12 the initial partial filing fee and all installment payments required by the court.

13 I declare under the penalty of perjury that the foregoing is true and correct and  
14 understand that a false statement herein may result in the dismissal of my claims.

15  
16 1-16-08

17 DATE

Deurane River

18 SIGNATURE OF APPLICANT  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28

## PROOF OF SERVICE

I, Dewane Kent Durr, CERTIFY AND DECLARE THAT I AM OVER THE AGE OF (18) YEARS, A PARTY TO THE WITHIN ACTION AND A CITIZEN AND OR RESIDENT OF THE UNITED STATES.

I SERVED THE FOLLOWING DOCUMENT(S), Prisoner's Application to Proceed in Forma Pauperis UPON THE PARTIES LISTED BELOW BY PLACING SEALED ENVELOPES IN THE UNITED STATES MAIL HERE AT F-2-B136<sup>4P</sup> P.O. Box 5244 Corcoran CALIFORNIA AS FOLLOWS:

Clerk of the United States District Court for the  
Northern District of California  
450 Golden Gate AV.  
Box 36060  
San Francisco CA. 94102

I, Dewane Kent Durr, SWEAR UNDER THE PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

EXECUTED AND DATED THIS 1 DAY OF 16, 20 08

Dewane Durr  
DECLARANT

Case Number: \_\_\_\_\_

CERTIFICATE OF FUNDS  
IN  
PRISONER'S ACCOUNT

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of Dewane Kent Durr for the last six months at

[prisoner name]

Corcoran Staff where (s)he is confined.

[name of institution]

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$ 0 and the average balance in the prisoner's account each month for the most recent 6-month period was \$ 0.

Dated: 1-16-08

T. Colwell AOS

[Authorized officer of the institution]

CALIFORNIA DEPARTMENT OF CORRECTIONS  
SATF/SP AT CORCORAN  
INMATE TRUST ACCOUNTING SYSTEM  
INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: JUN. 01, 2007 THRU JAN. 11, 2008

ACCOUNT NUMBER : P12787 BED/CELL NUMBER: FFB2T10000001360  
ACCOUNT NAME : DURR, DEWANE KENT ACCOUNT TYPE: I  
PRIVILEGE GROUP: A

## TRUST ACCOUNT ACTIVITY

&lt;&lt; NO ACCOUNT ACTIVITY FOR THIS PERIOD &gt;&gt;

## CURRENT HOLDS IN EFFECT

DATE PLACED	HOLD CODE	DESCRIPTION	COMMENT	HOLD AMOUNT
12/26/2007	H118	LEGAL COPIES HOLD	3395/12-07	2.80

## TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
0.00	0.00	0.00	0.00	2.80	0.00

CURRENT  
AVAILABLE  
BALANCE

2.80-

THE WITHIN INSTRUMENT IS A CORRECT  
COPY OF THE TRUST ACCOUNT MAINTAINED  
BY THIS OFFICE.  
ATTEST:

CALIFORNIA DEPARTMENT OF CORRECTIONS

BY J. Colwell  
TRUST OFFICE



Dewane Kent Durr # P12787  
F-2-B136 up  
P.O. Box 5244  
Corcoran, California 93212

*RS*  
**RECEIVED**

JAN 26 2008

RICHARD W. WIEGAND  
CLERK, U.S. DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

LEGAL MATERIALS

Att: Clerk of Northern  
District Court of California  
450 Golden Gate Av.  
P.O. Box 36060  
San Francisco, Ca 94102



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